Wildland Fire Investigation

INITIAL REPORT OF UNAUTHORIZED USE		DRIZED USE	Number Region Refuge Date
1. Name of person reporting violation*		Address (include zip code)	
2. Occupation and title			
3. Date		4. Type of unauthorized use	
a. Reported (month, day, year)	b. Discov	vered (month, day, year)	
			FIRE
	5. LC	CATION	
Section Township	Range	Subdivision	
Meridian County		State	
6. How was the unauthorized use disco	overed?		
7. What does unauthorized use appear to be? (Check One)		8. What is the recommendation? (Check One)	
Criminal Civil is	n nature	Report immediately to FWS Special Agent	S Investigate further
Name of Reporting Officer		Title	
Comments and recommendations (incl	ude name and address of suspect	ed unauthorized user, if known)	
		(Signature of Re	eporting Officer)

^{*}Informant's name may be held confidential at their request